PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

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TRANSMITTAL	Filing Date	September 10, 200	2 RECEIVED						
FORM	First Named Inventor	Olivler Boireau	CENTRAL FAX CENTER						
FORIVI	Art Unit	2841							
	Examiner Name	Lourdes C. Cruz	OCT 0 7 2005						
(to be used for all correspondence after initial filing)	Attorney Docket Number	71522-0002							
Total Number of Pages in This Submission 2		71322-3332							
ENCLOSURES (Check all that apply)									
Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on Carks	Address Rec	After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below): quest for Withdrawal as Attorney or Agent I Change of Correspondence Address O/SB/83)						
SIGNATURE	OF APPLICANT, ATTO	RNEY, OR A	GENT						
Firm Name McGarry Bair PC									
Signature Printed name									
Date Joel E Bair —		Reg. No. 33,3	56						
V 70GT200									
CERTIFICATE OF TRANSMISSION/MAILING									
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on									
the date shown below: Signature	ea L. Shi	l A							
Typed or printed name Rebecca L. Shilt Date Oct. 7, 2005									

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/83 (09-04)

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/065,016	RECEIVED
Filing Date	September 10, 2002	CENTRAL FAX CENTER
First Named Inventor	Olivier Boireau	0 2: 1
Art Unit	2841	OCT 0 7 2005
Examiner Name	Lourdes C. Cruz	00: 0 : 2000
Attorney Docket Number	71522-0002	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
Please withdraw me as attorney or agent for the above identified patent application, and								
all the attorneys/agents of record.								
the attorneys/agents (with registration numbers) listed on the attached paper(s), or								
the attorneys/agents associated with Customer Number 20915						ľ		
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.								
The reasons for this request are:  The U.K. assignee has gone into administration in the UK and the rights to the inventions have all been purchased from administration by Motorola. Neither the administrator nor Motorola has authorized counsel to continue representation and the unpaid accounts for the pending application remain unpaid with little or no prospect for payment.								
	CORRESPONDEN	CE	ADDR	ESS				
1. The correspondence address is NOT affected by this withdrawal.  2. Change the correspondence address and direct all future correspondence to:								
The address associated with Customer Number:								
Firm or Individual Name	Motorola Inc. / Randy Vaas							
Address	6000 North US Highway Room AN475							
City	Libertyville S	tate	IL				Zip	60048
Country	us							
Telephone	847-680-7064				Fax			
Signature	ans and a second			Do al-1		Na T		
Name Joel E. Bair			Registration No.			33,356		
Date / /20	120ct 2005		1.000			616-742-3500		
NOTE: Withdrawer's effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.								

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